

Work Order ID 100114

April-18-13 9:26:11 AM

ASAP

100114

Page 1

Item ID: 646.3511

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Strut

Start Date: 4/18/13 Start Qty: 10.00

10

Cust Item ID:

Required Date: 4/25/13 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals:

Process Plan: MCT

Date: 13-04-18

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
646.3500	N/C

110

0.00

110

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut 646.3500 plate 2.75"x 1.50" as per Dwg

Dwg Rev: N/C

Prog Rev: N/C

2-Deburr if necessary

12

0

Jm13-4-19

10

0

Jm13-4-27

120

QC2- inspect parts off machine FAI/FAIB

0.00

120

QC

Memo

0.00

Quality Control

12

0

Jm13-4-19

10

0

Jm13-4-27

PTO
→

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: *Ant* Date: 13/05/22QA Closed: *CK* Date: 13/5/15

Work Order: <u>100114</u>				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. <u>646.3511</u>				Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		Skid-tube <input type="checkbox"/> Crosstube <input type="checkbox"/> Water Jet <input type="checkbox"/> Engineering <input type="checkbox"/> Machining <input type="checkbox"/> Small Fab <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Quality <input type="checkbox"/> Thermoforming <input type="checkbox"/> Finishing <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Other <input type="checkbox"/> Large Fab <input type="checkbox"/> Composite <input type="checkbox"/> Supplier <input type="checkbox"/>					
NCR No. <u>13-2602</u>											

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data	<i>13/4/25</i>	100	<i>10</i>	Due to tubing cracking When forming bend of Alum. tube Apical authorize use to use Stainless Steel	DAS 16 9-30 <i>13/04/25</i> <i>SP</i>	Scrap <i>all</i> plates & See attach E-mail <i>110.58</i> <i>110.58</i>	<i>13.04.25</i> 	DAS 16 9-30 <i>13/04/25</i>	DAS 16 9-30 <i>13/04/25</i>
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY														
Landing Gear				General										
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure	<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Out of Calibration		<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Out of Sequence		<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Outside Dimensions		
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish				<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio								

April-18-13 9:26:11 AM

Page 2

Accept

Setup Start *NS1*

Stop *NS2*

Start Date: 4/18/13 **Start Qty:** 10.00 ***10***

Cust Item ID:

Required Date: 4/25/13 **Req'd Qty:** 10.00 ***10***

Customer:

Reference:

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____ **Run** **Start** ***NR1***
 QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____ **Stop** ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130 QC8- Inspect parts - second check

130

QC

Quality Control

Memo

Set Up/ Run Hours

0.00

0.00

0.00

0.00

0.00.

0.00

Tool ID

Tool #

**Plan
Code**

Accept
Qty

Reject
Qty

Reject Number

**Insp.
Stamp**

140

140

Small Fab

Small Fab

Memo

1- Fabricate tube as per dwg

QC5- Inspect part completeness to step on W/O

150

150

QC

Quality Control

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 100114

April-18-13 9:26:11 AM

100114

Page 3

Item ID: 646.3511

Accept

N9000040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Strut

Start Date: 4/18/13 Start Qty: 10.00

10

Cust Item ID:

Required Date: 4/25/13 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160	Weld per dwg A/R Aluminum rod Batch: <u>M122357</u>	0.00							
160									
Large Fab									
Large Fab	<i>B.O.H. 24</i> Memo Weld tube to plate as per dwg. Weld end were tube is punch.	0.00							
170	QC9- Inspect visual per QSI004- Fusion Welds	0.00							
170									
QC	Memo	0.00							
Quality Control									
180	QC5- Inspect part completeness to step on W/O	0.00							
180									
QC	Memo	0.00							
Quality Control									

⑨ EL 13-5-7

⑨ B-05-08 09
9-89

⑨ B-05-08 09
9-89

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 100114

April-18-13 9:26:11 AM

100114

Page 4

Item ID: 646.3511

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Strut

Start Date: 4/18/13 Start Qty: 10.00

10

Cust Item ID:

Required Date: 4/25/13 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
190 *190* Outsource4 Outsource process - Anodize	Outsource process - Anodize per QSI017 4.1.10.1 Memo Issue P/O Anodize as per dwg	0.00 0.00							
200 *200* Packaging Packaging	Receive & Inspect for Damage & Mat'l Certs Memo	0.00 0.00							
210 *210* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00 0.00							

13.04.25

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 100114

April-18-13 9:26:11 AM

100114

Page 5

Item ID: 646.3511

Accept

N9000040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Strut

Start Date: 4/18/13 Start Qty: 10.00

10

Cust Item ID:

Required Date: 4/25/13 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
220		0.00							
220									
SprayPaint	Memo	0.00				9			J.P. / M.W.
Spray Painting	Prime as per dwg (see note 3)								13-05-9
	Batch: 125243								
230	QC14- Inspect Spray Paint	0.00							
230									
QC	Memo	0.00				9			DAS 05 13-05-10
Quality Control									
240	Receive & inspect for Damage & Mat'l Certs	0.00							
240									
Packaging	Memo	0.00				9x			Sp
Packaging	***IDENTIFY AS PER APICAL MPP-120 BY STAMPING THE P# AND REV***								13-5-13

ST 542

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 100114

April-18-13 9:26:11 AM

100114

Page 6

Item ID: 646.3511

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Strut

Start Date: 4/18/13 Start Qty: 10.00

10

Cust Item ID:

Required Date: 4/25/13 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
250	QC21- Final Inspection - Work Order Release	0.00							
250									
QC	Memo	0.00							
Quality Control									

13/5/13
MF
13-5-13

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

April-18-13 9:26:14 AM

Page 1

Work Order ID: 100114

100114

Parent Item: 646.3511

646.3511

Parent Item Name: Strut

Start Date: 4/18/13

Required Date: 4/25/13

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP REV:A 12.10.19 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

M6061T6S.063

Purchased

No

sf

220.8625

0.292632

M6061T6S.063

6061-T6 .063 Sheet

**

0.5

JM13-4-19

JM13-4-27

M3045 .063" thick

Location

Loc Qty

Loc Code

MAT021

220.8625

123135

120.5625

124003

100.3

12

f

131.8500

124003

124578

8.771579

M6061T6T0.500W.065

Purchased

No

M6061T6T0.500W.065

6061T6 RD TUBE .500 X .065W

**

FF 13-04-29

M304 T0 .500w 049

Location

Loc Qty

Loc Code

MAT014

131.85

112083

131.85

1 x 120633 10"

9 x 117598 10"

7.5'

84'

As per attach E-mail

13.04.24

13.04.24

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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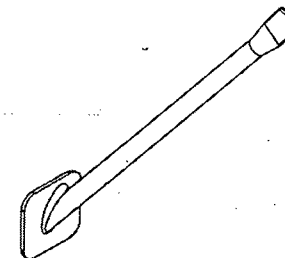
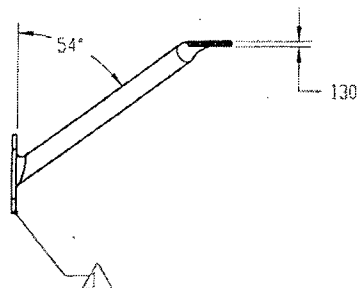
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

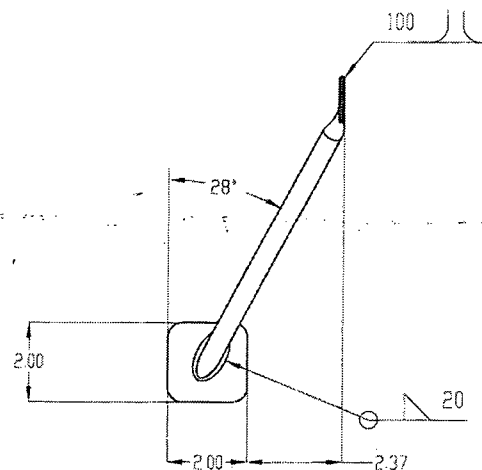
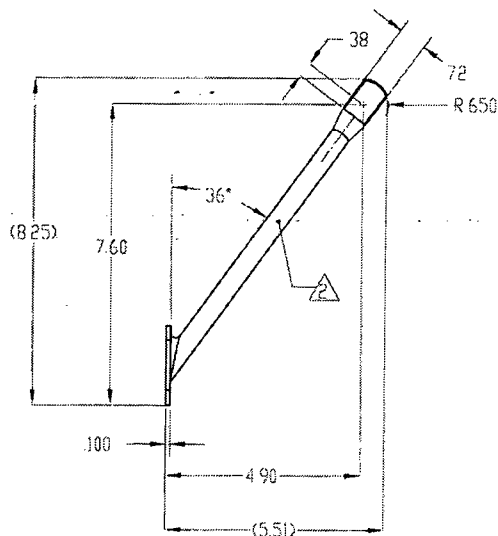
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled		
<input type="checkbox"/> Other		

APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTIC. NO. 02440		SHEET 1 OF 1	
	DWG NO. 646.3500	REV: NC	PREPARED BY S. HUFF	DATE 06/08/09
	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.			
DWG TITLE: STRUT				
APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: CURRENT ORDER AND STOCK	
REASON: REVISED GEOMETRY TO ACCOMMODATE NEW EXISTING AIRCRAFT PROVISIONS				
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE				

SHEET 2 IS:



646.3512 SHOWN
646.3512 OPPOSITE



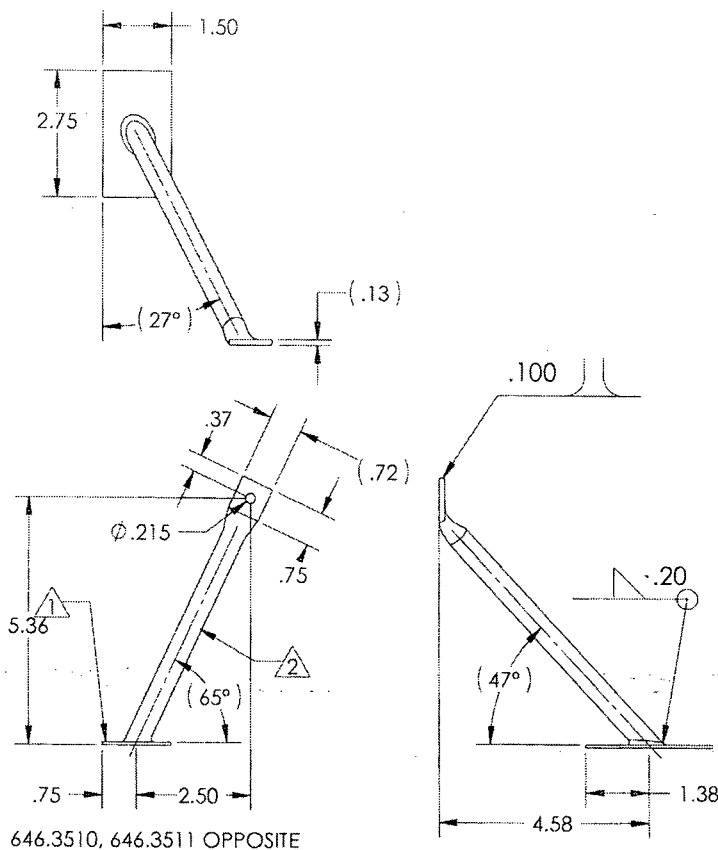
100.114-MCS

1304-18

DOCUMENTS EFFECTED:	<input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRU <input type="checkbox"/> ICA <input type="checkbox"/> FMS <input type="checkbox"/> BOM	CHANGE CATEGORY	DER REVIEW REQUIRED
		<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

NOTES:

1. MATERIAL: 6061-T6 ALUMINUM IAW AMS-QQ-A-250/11;
.062" THK.
2. MATERIAL: 6061-T6 ALUMINUM IAW AMS-WW-T-700/6
.500" OD; .062" WALL THK.
3. FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2
COLOR BLACK;
CARDINAL 4860-50 PRETREATMENT PRIMER
PRIME IAW MIL-P-23377J TYPE I CLASS N
4. DEBURR AND BREAK ALL SHARP EDGES
5. WELDS IAW MIL-STD-2219;
TIG WELD WITH FILLER ROD



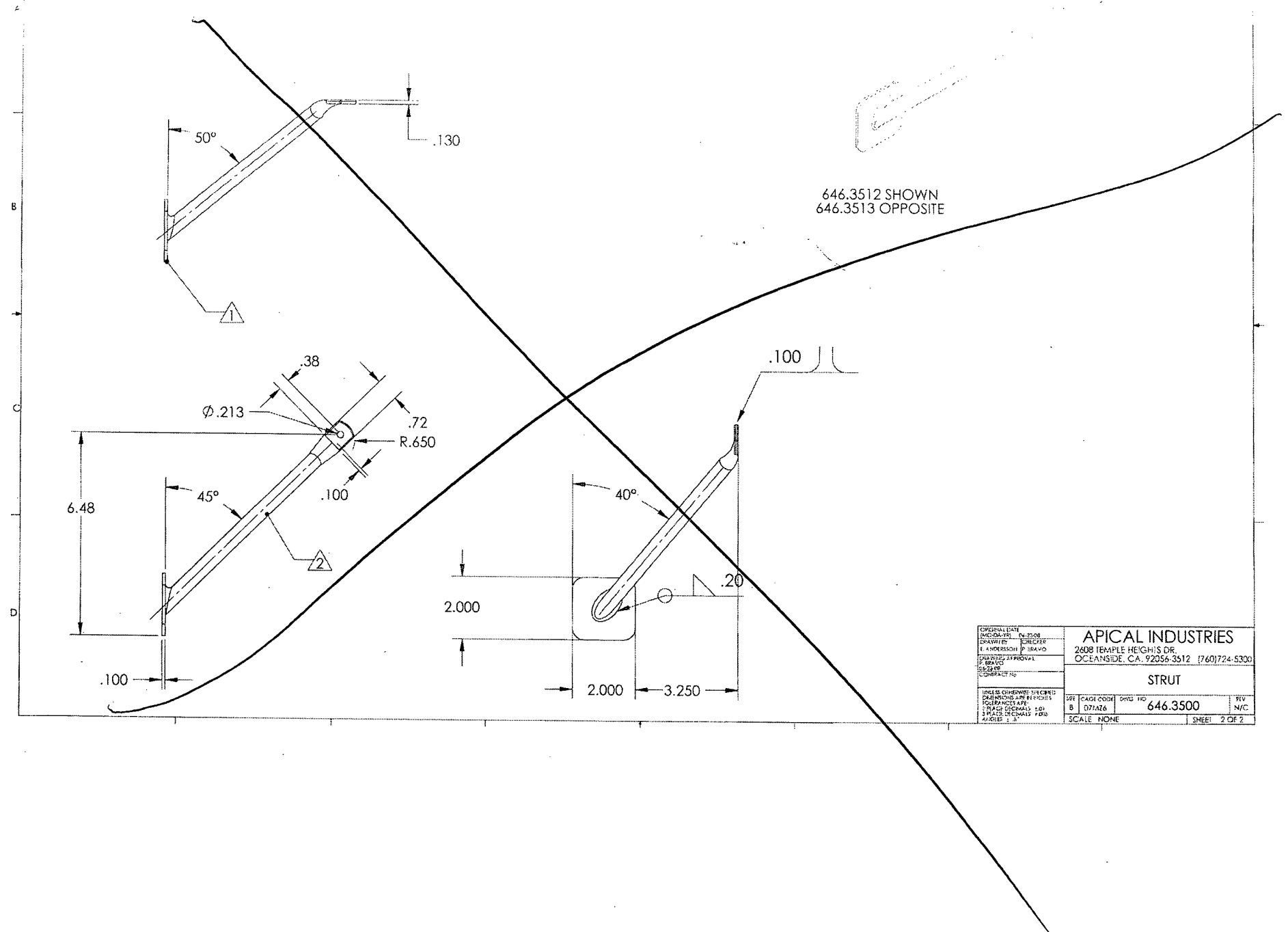
646.3510 SHOWN
646.3511 OPPOSITE

UNINCORPORATED ECN(s)

02197, 02440,

		646.3513	STRUT	△△	△			
		646.3512	STRUT	△△	△			
		646.3511	STRUT	△△	△			
		646.3510	STRUT	△△	△			
	PND #	PART #	DESCRIPTION	MAT'L	SPEC.			
QTY	PARTS LIST							
NEXT ASSY (S)	APICAL INDUSTRIES							
646.4000	2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5500							
	STRUT							
	DESIGNER: DATE: 06-25-08	REV: 1						
	DRAWN BY: L. ANDERSON	REV: 2						
	ENGINEER: P. BRAVO	REV: 3						
	APPROVAL: P. BRAVO	REV: 4						
	DATE: 06-25-08	REV: 5						
	COORDINATOR:	REV: 6						
	UNLESS OTHERWISE SPECIFIED							
	DIMENSIONS ARE IN INCHES							
	TOLERANCES ARE:							
	2 PLACE DECIMALS ± .01							
	3 PLACE DECIMALS ± .005							
	ANGLES ± .5°							
	SCALE: NONE	SHEET 1 OF 2						

100114



<small> ORIGINAL DATE INDICATED IN POSITION DRAWN BY: DIRECTOR E. ANDERSON P. BRAVO DRAWING APPROVAL P. BRAVO SCALE UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS FRACTIONS 1/16" 0.0001" 1/16" </small>		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
		STRUT	
DATE	CAD/CHECK	DWG. NO.	REV.
B	07/10/16	646.3500	N/C
SCALE: NONE		SHEET 2 OF 2	

